When Application and Authorization sections	Please check one:
are completed, please submit the original to:	
State Board of Finance	State Transfer (SDCL 3-9-9)
Office of Secretary of State	Full-time continuous employment for 6 months.
500 E Capitol Ave	Professional Recruitment (SDCL 3-9-12)
Pierre SD 57501 Phone: 605-773-3537	Attach a written copy of the offer of employment and of payment of moving expenses.
PLEASE NOTE: The request and all supporting documenta	tion must be received in the Office of the Secretary of State as
than 5.00 p.m. CI cight days brior to the Roard	of Kingace meeting on the third Treader of the
bocamentation received after that time will be processed at	the next Board of Finance meeting All decomments of Arrow
comply with Buleau of Human Resources policies regarding pr	otection of personally identifiable information.
	• "
17auls to krskine	Correctional Officer DOC/MDSP
Name of Applicant	New Position Title Agency Employed By
Name of Applicant 136 477 Yearly Salary Celius off City, State Moving From	Springfield Spring
060336	Significant state of the state
	8/2-9/2020
Bureau of Human Resources Class Code	Employment Date with the State
I understand that household moving allowance is consideresponsible for all applicable payroll taxes. I know I may contact the second of the second se	dered taxable income according to IRS regulations, and I am my agency's finance officer for options. 9/17/2020 Date
Autho	rization
The undersigned agent hereby certifies that the above individual that the agency ordered the applicant to move as indicated, and the agency ordered the applicant to move as indicated.	idual is employed in a full-time position with the above agency, hat the move will be for the benefit of the State of South Dakota. edge and belief, the request and authorization for reimbursement
MIKE LEIDHOLT	SECRETARY OF CORRECTIONS Position/ Title of Authorized Agent
Name of Authorized Agent	Position/ Title of Authorized Agent
MINA Xishart 9-21-6	SD DEPT OF CORRECTIONS
Signature of Authorized Agent Date	Agency of Authorized Agent
A11 C()	D. 1 CE
	Board of Finance
Approved by the State	
Board of Finance on	
Date Signature	of Secretary State Board of Finance

South Dakota

Bureau of Human Resources

Bureau of Human Resources 500 East Capitol Avenue Pierre, SD 57501-5070 605.773.3461 http://bhr.sd.gov/

August 11, 2020

Travis Erskine 8715 Alpha St Celina OH 45822

Dear Travis:

This letter will serve as a written follow up to our verbal offer of employment as a Correctional Officer position with the Mike Durfee State Prison at an hourly rate of \$17.47. The Department of Corrections will allow you reimbursement of moving expenses you accrue up to one month of your salary. In order for the expenses to be reimbursed you must submit the Household Moving Allowance Application, this offer letter and any receipts of payment for moving. The effective date of this offer will be Monday August 24, 2020. Please report to the Mike Durfee State Prison at 8:00am on Monday August 24,2020.

Casual dress attire is preferred. Cell phones are not allowed on the facility.

This offer is contingent upon negative drug screening results. Please make an appointment with my office (605-369-4427) to schedule a date and time prior to starting to have the drug screening completed

Also, please be aware that you will be serving a six-month probationary period. During this time period your performance will be reviewed periodically to determine if you will be recommended for status in the South Dakota Career Service system. Also, please note that your health insurance coverage will not begin until one month and one day after your start date (indicated above).

We look forward to having you on our staff. We hope your employment with the Mike Durfee State Prison will be rewarding experience. If there are any questions, please contact the Human Resource Office at 605-369-4427.

Sincerely,

Mary Ann Kloucek

Human Resource Specialist Mike Durfee State Prison

When Application and A		Please check one:		
are completed, please su	bmit the original to:	State Transfer (SDCL 3-9-9)		
State Board of Finance		Full-time continuous employment for 6 months.		
Office of Secretary of Sta	le	Professional Recruitment (SDCL 3-9-12) Attach a written copy of the offer of employment and of payment of		
500 B Capitol Ave	N (A.C 982 2 222		er of employment and or payment of	
Pierre SD 57501	Phone: 605-773-3537 equest and all supporting <u>document</u>	moving expenses.	ice of the Secretary of State no	
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comply with Bureau of H	uman Resources policies regarding p	rotection of personally identifiable	information.	
	Apr	lication		
	**			
Zachary Tschetter		Instructor	USD CSC	
Name of Applicant		New Position Title	Agency Employed By	
400 500	Claux Falla CD	Vermillion	August 2020	
\$63,500	Sloux Falls, SD City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move	
Yearly Salary				
0090	0	August 17, 2020		
Bureau of Human Resour		Employment Date with the State		
Dailetta D. 110/11111 110000		•		
l understand that ho responsible for all applications. Jack Tackett Signature of Applicant	busehold moving allowance is controlled payroll taxes. I know I may controlled the May Market	sidered taxable income according act my agency's finance officer for 9/7/2020 Date	options.	
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that the agency ordered the Agent further declare	ent hereby certifies that the above ind he applicant to move as indicated, an es that, to the best of the Agent's kno ing expenses are true and correct.	at that the move will be for the bene	III OI IIIG DINIE OF JOHN DEVAIN	
Emery Wasley		Assistant VIce Pre		
Name of Authorized Age	mt	Position/Title of Authorized A		
1.1/ 6:00		University of South	n Dakota	
yann folk	ey 10-7-20.	Agency of Authorized Agent		
Signature of Authorized	Agent Date	Agency of Authorized Agent		
Approved by the State Board of Pinance on		ate Board of Finance		
	Date Signs	ture of Secretary, State Board of F	inance	



MEMORANDUM

DATE:

June 15, 2020

TO:

Zach Tschetter

FROM:

Without Kruger Michael Kruger, Dean, College of Arts and Sciences

RE:

Appointment with the Department of Computer Science

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Instructor in the Department of Computer Science. This is a term position, the effective date of which is August 22, 2020. Annual appointment dates are August 22nd through May 21st. Your salary is \$63,500 based on nine months at 100% time. KC Santosh will be your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

Your work reporting date is August 17, 2020. Your work release date is May 14, 2021. In the event the University has to modify the method of course delivery and/or adjust the academic calendar for fall semester due to the COVID-19 pandemic, the University reserves the right to modify the reporting dates of this appointment. If such modification is necessary, the University will provide notice at least 30 days prior to the current report date or new report date, whichever is earlier, and additional compensation and/or contract working days will be added to total compensation at the same salary rate as set forth in the current appointment. Reporting dates for international employees are dependent on work authorization.

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States. pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime. Your position is eligible for state benefits to include household moving allowance as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$2,500 in moving expenses. Reimbursed moving expenses are considered taxable income. Once you receive payment, Payroll will contact you to determine how the payment is recorded as taxable income. Please note that the amount must be recorded as income in the calendar year it is received. Guidelines on allowable expenses may be found at http://legis.state.sd.us/rules/DisplayRule.aspx?Rule=05:01:07&Type=Rule.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and returning this letter, the attached personal data sheet, and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than June 17, 2020, retaining a copy for your records. Please sign the documents electronically or send the hard copies to:

Katherine Price Office of the Dean/College of Arts & Sciences The University of South Dakota 414 E. Clark. St. Vermillion, SD 57069 Katherine.Price@usd.edu

cc:

Jose Flores, Chair, Department of Computer Science Nathan Gotto, HR Generalist, Office of Human Resources

I accept the job offer outlined above.

6/15/2020

Signature of Appointee & Date Signed

Encl: Intellectual Property Policy Intellectual Property Form Conflict of Interest Form Employee Personal Data Sheet

PLEASE NOTE: The request a later than 5:00 p.m. CT eigh	e original to: 05-773-3537 nd all supporting document t days prior to the Boa	Please check one: State Transfer (SDCL 3-9-9) Full-time continuous employment for 6 months. Professional Recruitment (SDCL 3-9-12) Attach a written copy of the offer of employment and of payment of moving expenses. Intation must be received in the Office of the Secretary of State in ard of Finance meeting on the third Tuesday of the month at the next Board of Finance meeting. All documentation MUS		
	esources policies regarding p	protection of personally identifiable in polication		
Jose Lira	P I		RRC	
Name of Applicant		Research Associate 1 New Position Title	Agency Employed By	
	Toyac	Vermillion	09/2020	
# 15.50/ hr. Yearly Salary Cit	y, State Moving From	New Post of Duty (City)	Expected Month/Year of Move	
8 Bureau of Human Resources Clas		Employment Date with the State	2	
		sidered taxable income according act my agency's finance officer for operation of the desired by		
	Auth	orization		
that the agency ordered the applic	eant to move as indicated, and the best of the Agent's kno	lividual is employed in a full-time pos d that the move will be for the benefit wledge and belief, the request and au	t of the State of South Dakota.	
Emery Wasley		Assistant Vice Presi	ident, HR	
Name of Authorized Agent		Position/ Title of Authorized Age	ent	
When Jolle	y 107-20.	University of South	Dakota	
Signature of Authorized Agent	Date	Agency of Authorized Agent		
Approved by the State Board of Finance on		ate Board of Finance	ance	



UNIVERSITY OF SOUTH DAKOTA

SANFORD SCHOOL OF MEDICINE MEMORANDUM

DATE:

August 31, 2020

TO:

FROM:

Steve Waller, Associate Dean Basic Biomedical Sciences, University of South Dakota

Appointment with Division 102

RE:

Appointment with Division of Basic Biomedical Sciences, University of South Dakota

I am pleased to offer you, subject to approval by the Board of Regents, a non-faculty/exempt appointment as a Research Associate 1 in the Xuejun Wang's lab. The effective date of this appointment is September 21, 2020. Your hourly rate of pay will be \$15.50 based on 12 months at 100% time. Xuejun Wang will serve as your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

The administrative appointment shall commence on September 21, 2020 and shall not extend beyond June 21, 2021. Annual fiscal year appointment dates are June 22nd through June 21st. The positon is grant funded and the continuation of the position is contingent on the availability of funding.

The administrative employment may be renewed at the sole pleasure of the Board. If the Board elects to renew an administrative appointment, it may do so under whatever changed or additional terms and conditions it chooses. The administrative employment offered herein shall be at the pleasure of the Board and may be terminated without notice or cause.

This position has been identified as overtime eligible and, therefore, subject to the Fair Labor Standards Act (FLSA). The Board of Regents employs a compensatory time policy as permitted by the FLSA. This policy provides for the granting of compensatory time in combination with cash payment for all hours worked above 40 hours in any given work week (Sunday to Saturday). Compensatory time off may be taken at any time with prior approval from your supervisor. Additionally, compensatory time may be carried forward to subsequent pay periods indefinitely, to a maximum accumulation of 80 hours (160 hours for AES employees). The Board of Regents reserves the right, however, to pay cash to the employee for any or all accrued compensatory hours.

The University, in accordance with annual salary policy approved by the state legislature, the Board of Regents compensation policies, your performance, and institutional priorities, will determine any future annual pay increases. Payroll dates begin on the 22nd of the month through the 21st with payroll on the last day of the month. Eligible leave will be accrued in accordance with your appointment and all employees are required to request leave through the payroll system to ensure leave is recorded accurately.

As an Research Associate, your position is eligible for state benefits to include household moving allowance of as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$1250 in moving expenses. Reimbursed moving expenses are considered taxable income. Benefits are administered through the State of South Dakota and are provided to any employee that is in a regular position that is employed at 50% or greater time.

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

You will be invited to a new employee orientation via separate email.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by electronically signing this offer, and the accompanying documents, by September 9, 2020.

ce: Xuejun Wang, Supervisor
Sharon Myers, Human Resources
Jackie Rubida, Department payroll representative

Paccept the job offer outlined above.

Jose (ira -e9aca6c2e306444... 9/2/2020

Signature of Appointee & Date Signed

When Application and Authorization sections	Please check one:		
are completed, please submit the original to:	State Transfer (SDCL 3-9-9)		
State Board of Finance	Full-time continuous employment for 6 months.		
Office of Secretary of State	Professional Recruitment (SDCL 3-9-12)		
500 E Capitol Ave	Attach a written copy of the offer of employment and of payment of		
Pierre SD 57501 Phone: 605-773-3537	moving expenses.		
PLEASE NOTE: The request and all supporting documentati	on must be received in the Office of the Secretary of State no		
	of Finance meeting on the third Tuesday of the month.		
Documentation received after that time will be processed at t comply with Bureau of Human Resources policies regarding pro			
Appn	cation		
Timothy, Ricker	Assistant Port USA		
Name of Applicant	New Position Title Agency Employed By		
2.1			
CON EVANVIR IN	Vermillion Aug 2020		
Yearly Salary City, State Moving From	New Post of Duty (City) Expected Month/Year of Move		
and the same of th	Aug 22 2121)		
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Bureau of Human Resources Class Code	Employment Date with the State		
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expenses subject to the limitations established by South Dal	a voucher for reimbursement of actual household moving		
household moving expenses.	tota law. I shall attach to said voucher evidence of actual		
	ered taxable income according to IRS regulations, and I am		
responsible for all applicable payroll taxes. I know I may contact	my agency's finance officer for options.		
	/ /		
	09/23/2020		
Signature of Applicant	Date		
orginature of Approxim	Date		
Author	ization		
M			
The undersigned agent hereby certifies that the above individ			
	fual is employed in a full-time position with the above agency,		
that the agency ordered the applicant to move as indicated, and the	at the move will be for the benefit of the State of South Dakota.		
The Agent further declares that, to the best of the Agent's knowle	at the move will be for the benefit of the State of South Dakota.		
that the agency ordered the applicant to move as indicated, and the The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct.	at the move will be for the benefit of the State of South Dakota.		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct.	at the move will be for the benefit of the State of South Dakota. dge and belief, the request and authorization for reimbursement		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley	at the move will be for the benefit of the State of South Dakota. dge and belief, the request and authorization for reimbursement Assistant Vice President, HR		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Agriculture Agent	at the move will be for the benefit of the State of South Dakota. dge and belief, the request and authorization for reimbursement		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Agriculture Agent	Assistant Vice President, HR Position/ Title of Authorized Agent		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Authorized Agent Wann for the Agent 10 - 7 - 20.	Assistant Vice President, HR Position/ Title of Authorized Agent University of South Dakota		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Agriculture Agent	Assistant Vice President, HR Position/ Title of Authorized Agent		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Authorized Agent Signature of Authorized Agent Date	Assistant Vice President, HR Position/ Title of Authorized Agent University of South Dakota Agency of Authorized Agent		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Authorized Agent Wann for the Agent 10 - 7 - 20.	Assistant Vice President, HR Position/ Title of Authorized Agent University of South Dakota Agency of Authorized Agent		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Authorized Agent Signature of Authorized Agent Approval by State	Assistant Vice President, HR Position/ Title of Authorized Agent University of South Dakota Agency of Authorized Agent		
The Agent further declares that, to the best of the Agent's knowle of actual household moving expenses are true and correct. Emery Wasley Name of Authorized Agent Signature of Authorized Agent Date	Assistant Vice President, HR Position/ Title of Authorized Agent University of South Dakota Agency of Authorized Agent		



MEMORANDUM

Kunger.

DATE:

August 11, 2020

TO:

Timothy Ricker

FROM:

Michael Kruger, Dean

RE:

Appointment with the Department of Psychology, College of Arts and Sciences

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Assistant Professor in the Department of Psychology at the University of South Dakota (USD). The effective date of this appointment is August 22, 2020. Annual appointment dates are August 22nd through May 21st. Your salary is \$68,000 based on nine months at 100% time. Douglas Peterson, Chair, USD Psychology is your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

Your work reporting date is August 17, 2020. Your work release date is May 14, 2021. In the event the University has to modify the method of course delivery and/or adjust the academic calendar for fall semester due to the COVID-19 pandemic, the University reserves the right to modify the reporting dates of this appointment. If such modification is necessary, the University will provide notice at least 30 days prior to the current report date or new report date, whichever is earlier, and additional compensation and/or contract working days will be added to total compensation at the same salary rate as set forth in the current appointment. Reporting dates for international employees are dependent on work authorization.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties form, also enclosed is a conflict of interest form. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime. As an Assistant Professor, your position is eligible for state benefits. The University of South Dakota will provide up to \$2,500 in moving expenses. Reimbursed moving expenses are considered taxable income. Once paid, Payroll will be contacting you regarding any options available to you with regards to the deduction.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing electronically no later than August 13, 2020.

I accept the job offer outlined above.

Docysigned by: Vimathy D. Ficker	8/12/2020	
80C2C2AEF20A488		
Signature of Appointee	Date	

JM (G

When Application and A	uthorization sections	Please check one:	
are completed, please su	bmit the original to:	State Transfer (SDCL 3	
State Board of Finance		Full-time continuous empl	loyment for 6 months.
Office of Secretary of Stat 500 E Capitol Ave	e	X Professional Recruit	ment (SDCL 3-9-12)
	Phone: 605-773-3537	Attach a written copy of the o	offer of employment and of payment of
		tation must be received in the Of	fice of the Secretary of State no
later than 5:00 p.m. C Documentation received	T eight days prior to the Bos after that time will be processed	ard of Finance meeting on the at the next Board of Finance mee protection of personally identifiable	third Tuesday of the month. ting. All documentation MUST
	Ap	plication	
Mark Stevens		Assistant Professor	South Dakota State University
Name of Applicant	3	New Position Title	Agency Employed By
\$59,000	Pullman, WA	Brookings, SD	July 2020
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
15		August 22, 2020	
Bureau of Human Resource	ces Class Code	Employment Date with the Sta	te
responsible for all applicab		atact my agency's finance officer fo	•
Signature of Applicant		Date 6/29/2020 11	:35 PDT
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Dakota The Agent further	rdered the applicant to move as ind	icated, and that the move will be for gent's knowledge and belief, the req	r the benefit of the State of South
	household moving expenses are true		uest and authorization for
	,		
David Reynolds		Director, School of Perf	orming Arts
Name of Authorized Agen	t	Position/ Title of Authorized A	
DocuSigned by:	6/20/2020 11:19		
Varid Reynolds	6/29/2020 11:18	South Dakota State Offi	versity
Signature of Anthorized A	agent Date	Agency of Authorized Agent	
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	Approvar by St	ate Board of Finance	
Approved by the State Board of Finance on			
-	ate	ature of Secretary, State Board of F	inance
	A.P	J winit would of I	

MEMORANDUM

DATE:

March 28, 2020

TO:

Mark Stevens, DMA

FROM:

David Reynolds, DMA

site and Rolling South Dakota State Universi

RE:

Appointment with School of Performing Arts, South Dakota State University

I am pleased to offer you, subject to approval by the President, an appointment as Assistant Professor of Music (Piano) in the School of Performing Arts. The effective date of this appointment is August 22, 2020. Annual appointment dates are August 22, 2020 to May 21, 2021. Your salary is \$59,000 based on 9th months at 100% time. I will serve as your direct supervisor. As with all employees, you will be evaluated annually.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. This offer is contingent on the university's verification of credentials and other information required by law and/or university policies, including but not limited to a criminal background check. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Payroll Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

As Assistant Professor of Music, your position is eligible for state benefits to include a household moving allowance of \$3500.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter, a signed copy of the enclosed agreement to assign Intellectual Property, and the Conflict of Interest Form to my attention no later than April 15, 2020, retaining a copy for your records.

Cc: Lynn Sargeant, Dean

I accept the job offer outlined above.

Signature of Appointee

South Dakota State University Expectations of Employment Document

We are pleased to extend an offer of employment and membership with South Dakota State University in the School of Performing Arts. This expectations document is made in conjunction with the South Dakota State University offer of employment to join the College of Arts, Humanities, and Social Sciences. South Dakota State University is a public University under the governance of the South Dakota Board of Regents.

- 1. **Appointment**. Appointee is hereby appointed as Assistant Professor, employed at 100% time, within the School of Performing Arts, subject to provisions herein. This is a Tenure Track appointment. Your Tenure Track begin date is August 22, 2020.
- 2. Salary, Leave and Benefits. Appointee shall be paid 59,000 which will be paid out over 12 payrolls. Depending on funding conditions, South Dakota State University may subsequently adjust Appointee's compensation to include performance-based merit and market increases. The state will set the annual salary increase in conjunction with the South Dakota Board of Regents. Payroll dates are the 22nd through the 21st, with payment on the last working day of the month. Eligible leave will be accrued in accordance with your contract and faculty will be required to request leave via the leave request system. Benefits are administered through the State of South Dakota and are provided to any employee who is in a regular position, employed at 50% time or greater. The base salary could be subject to change should there be a change in duties, appointment percent or contract length.
- 3. **Term**. This is a 9 month appointment which begins on August 22, 2020. Annual appointment dates are August 22, through May 21. The report date for all faculty is five working days prior to the first day of class. This year the report date is August 17, and the first day of class is August 24.
- 4. This appointment is subject to the constitution and laws of the State of South Dakota, policies and regulations of the Board and of South Dakota State University, insofar as these may govern terms and conditions of employment.
- 5. Additional College or South Dakota State University Expectations. The Standards Document for the School of Performing Arts is attached.
- 6. Verification of Credentials. Upon the request of the South Dakota State University, Appointee agrees to have sent to the South Dakota State University, upon its request, certified copies of any transcript(s) reflecting the award of degree(s) listed as received on the Appointee's curriculum vitae. Appointee further agrees to provide to the South Dakota State University, upon its request, evidence of employability as required by the United States Immigration Laws. Appointee agrees that the employment of Appointee is terminable by the South Dakota State University if at any time Appointee fails to provide such evidence.
- 7. Controlling Law. This expectation document shall be construed according to the laws of the State of South Dakota.

I have read,	understand	and accept all	the expectations	of my employment	as outlined:
ma 1	8	4.	4/2/20		

Signature of Appointee Date

	d Authorization sections	Please check one:	
are completed, please submit the original to:		State Transfer (SDCL 3-9-9	
State Board of Finance Office of Secretary of S	State	Full-time continuous employn	
500 E Capitol Ave	nate	Professional Recruitment (
Pierre SD 57501	Phone: 605-773-3537	moving expenses.	of employment and of payment of
PLEASE NOTE: The	request and all supporting docu	mentation must be received in the Offic	e of the Secretary of State no
		Board of Finance meeting on the th	
		ssed at the next Board of Finance meeting protection of personally identifiable in	
,	Parameter Personal Pe	Application	
Alison Coulter		Assistant Professor	SDSU
Name of Applicant		New Position Title	Agency Employed By
\$75,374	Carbondale, IL	Brookings, SD	September 2020
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
	,,	January 4, 2020	•
		Employment Date with the State	
Bureau of Human Reso	urces Class Code		
responsible for all applic	able payroll taxes. I know I may	y contact my agency's finance officer for or	otions.
alison Coulter	4.1	9/17/2020 13:45 CDT	
Signature of Applicant		Date	
		Authorization	
T	1 1 20 1 1 1		
		ve individual is employed in a full-time pos	
		ed, and that the move will be for the benefit 's knowledge and belief, the request and au	
	ving expenses are true and corre		
Michele Dudash		Department Head	
Name of Authorized Ag	gent	Position/ Title of Authorized Age	
Michele R. Dudash	9/17/2020	13:46 Natural Resource Ma	anagement, SDSU
Signature of Authorize	d Agent Date	Agency of Authorized Agent	
	A mmaxxx1 1	y State Doord of Einen	
	Approval by	y State Board of Finance	
Approved by the State Board of Finance on			
Double of I manee off			

MEMORANDUM

DATE:

2 September 2020

TO:

Dr. Alison Coulter

FROM:

Michele R. Dudash, Department Head and Professor

South Dakota State University

Michele R. Dudash

-DocuSigned by:

RE:

Appointment with the Department of Natural Resource Management

Dear Alison,

On behalf of the South Dakota State University, I am very pleased to offer you, subject to approval by the President, an appointment as an Assistant Professor of the Natural Resource Management Department in the College of Agriculture, Food and Environmental Sciences. This is a 9-month, 100% time tenure-track position. This appointment and rank is also contingent on support and approval of the College Tenure & Promotion Committee, University Tenure & Promotion Committee, the South Dakota Board of Regents' Chief Academic Officer, and the South Dakota Board of Regents. The effective date of this appointment will be January 4, 2021. Annual appointment dates are August 22 to May 21. I, Dr. Michele R. Dudash, am your direct supervisor. As with all employees, you will be evaluated annually.

Your total annual salary is \$75,374 based on 9-months of work at 100% time. This salary is comprised of a faculty salary of 100 % rate of OK average salary for your position based on the 9-month faculty rate.

This position has been identified as exempt from the Fair Labor Standards Act (FLSA) and is therefore not subject to overtime.

This offer is contingent on verifying credentials and other information required by law and/or university policies, including but not limited to a criminal background check, as well as your delivery to Human Resources of an *official* transcript for your highest degree within 30 days of accepting this position. Withholding statements (W-4's) and United States employment eligibility verification documents (I-9) are available from the Payroll Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. The terms of appointment include a continuing nondisclosure obligation relating to personally identifiable information, access codes, and proprietary information made accessible to you in the course of your employment with the university that survives this appointment.

In accordance with <u>Board of Regents Policy 4:34</u>, the Board manages employee-created intellectual property. The provisions of this policy are enclosed. Also enclosed is a Conflict of Interest Form that must be completed pursuant to <u>Board of Regents Policy 4:35</u>. Please review the policies and forms, sign the forms where provided, and return the forms fully executed with this offer memo.

As a tenure-track Assistant Professor your position is eligible for state benefits to include household moving allowance of up to 1-month salary as outlined in SDCL 3-9-12. A Household Moving Allowance form and instructions have been enclosed.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and dating below and returning this memo, Expectations of Employment Document, a signed copy of the enclosed Agreement to Assign Intellectual Property, and a signed copy of the Conflict of Interest Form to my attention no later than September 14, 2020, retaining a copy of these documents for your records.

Cc:

Michele R. Dudash,

Marc Serrett, Human Resources

Provost and Vice President of Academic Affairs, Dennis Hedge

I accept the job offer outlined above.

9/8/2020 | 08:05 CDT

Signature of Appointee

Date

Encl: Expectations of Employment Document

Intellectual Property Policy and Intellectual Property Form

Conflict of Interest Policy and Form

Household Moving Allowance Form & Instructions

South Dakota State University Expectations of Employment Document

We are pleased to extend an offer of employment and membership with South Dakota State University in the Department of Natural Resource Management. This expectations document is made in conjunction with the South Dakota State University offer of employment to join the College of Agriculture, Food and Environmental Sciences faculty. South Dakota State University is a public University under the governance of the South Dakota Board of Regents.

- 1. **Appointment**. Appointee is hereby appointed as Assistant Professor, employed at 100% time, within the Natural Resource Management Department subject to provisions herein. This is a Tenure Track appointment. Your Tenure Track begin date is August 22, 2021.
- 2. **Salary, Leave and Benefits**. Appointee's annual contract salary of \$75,374 shall be pro-rated because of the mid-year contract which is commencing on January 4, 2021 and will be paid out over five payrolls. Depending on funding conditions, South Dakota State University may subsequently adjust Appointee's compensation to include performance-based merit and market increases. The state will set the annual salary increase in conjunction with the South Dakota Board of Regents. Payroll dates are the 22nd through the 21st, with payment on the last working day of the month. Eligible leave will be accrued in accordance with your contract and faculty will be required to request leave via the leave request system. Benefits are administered through the State of South Dakota and are provided to any employee who is in a regular position, employed at 50% time or greater. The base salary could be subject to change should there be a change in duties, appointment percent or contract length. Effective on August 22, 2021, your annual contract salary shall be paid out over 12 payrolls. Owing to this mid-year start in your appointment, additional health benefits will be deducted from your pay in January through May, which will cover your benefits in June, July and August of 2021. Effective on August 22, 2021 your benefit deductions will be taken monthly in each of the 12 payroll periods.
- 3. **Term**. This is a 9 month appointment and report date begins on January 4, 2021. Annual appointment dates are August 22nd through May 21st.
- 4. This appointment is subject to the constitution and laws of the State of South Dakota, policies and regulations of the Board and of South Dakota State University, insofar as these may be govern terms and conditions of employment and the provisions of the collective bargaining agreement.
- 5. Additional College or South Dakota State University Expectations.

This is a 55% research, 45% teaching appointment, specifically in Fisheries Sciences and Management. As a faculty member you are expected to understand and participate in the long range missions and the overall land grant missions of the department. Specifically, your contributions to the long range objectives will be: participation in teaching and undergraduate student recruiting, advising and mentoring programs. Research emphasis will be in Aquatic and Fisheries Sciences and Management.

This could include topics such as aquatic and fisheries sciences and management. Collaboration with other faculty members is expected. Courses to be taught will potentially include the following: Ichthyology, Principles and Advance Fisheries Management and a graduate course in your area of expertise. These assignments are subject to change depending on departmental needs. All faculty members are expected to provide service to the department and be actively engaged with partners outside of South Dakota State University. The Natural Resource Management Department Standards Document is attached for reference.

For the establishment of your research program I have identified an office in our building (Edgar McFadden Biostress) along with laboratory space. Graduate student office space is provided in common share rooms within the same building. NRM will also provide you with an office computer, monitor, printer, in addition to ample cloud storage space via BOX.

We are prepared to offer you the following startup package conditional on you submitting a Hatch project that is acceptable to USDA-NIFA as a part of the SDAES Program of Work. In order to collect the AES portion of your startup award, you must also join an applicable Hatch Multistate, Mc-Intire Stennis, or Animal Health project within your first 90 days of employment. The AES funds will be made available after both projects have been reviewed and accepted by the granting agency. This support is contingent on your continued appointment. Please note that there is no carry-over of these funds after the completion of three full years.

Startup research funding to help you launch a successful research program is being supported by the Natural Resource Management Department, The Agricultural Experiment Station, and South Dakota Game Fish and Parks. The Natural Resource Management Department is able to provide \$5,000 per year for three years and allocate you one MS level 12 month GTA three years, equal to at least \$54,000 and also a 3-year MS level 12 month GRA from our AES allocation equal to at least \$54,000 prior to tenure. Each of these graduate students also receive a full tuition waiver associated with their respective GTA and GRA awards.

Furthermore, SDAES is able to support your research for an additional \$75,000 with these funds being distributed \sim equally (\$25,000) over the first three years of your appointment in addition to one month of summer salary each year for the first three years. Moreover, Kevin Robling, representing SD GFP, has committed \$5,000 for one summer to initiate a mutually agreeable research project. Please note that a condition of these SD GFP funds is that you conduct a research project that is mutually beneficial to you and SD GFP in our state.

In total, we are able to offer you a startup package of >\$220,000 in combined support to establish your research program at SDSU. The SDAES startup funds (\$75,000 noted above) can be used for graduate student support, salary for technical support, summer salary supplement, operating expenses, equipment, or any combination that will best help you achieve your research goals.

Department and South Dakota Agricultural Experiment Station Start-Up Support

Total start-up package is greater than \$220,000. Further, your appointment allows for access to the labs within the Department as well as the RESEARCH FARMS/STATIONS for your research and teaching activities. SDAES requires you to write and submit a Hatch project proposal. In order to collect the AES portion of your startup award outlined in the chart below, you must also join an applicable Hatch Multistate, Mc-Intire Stennis, or Animal Health project within your first 90 days of employment. This support is contingent on your continued appointment.

Use of funds: Funds may be used in the manner that is most judicious for commencing a sustainable research program. Eligible uses include summer salary, graduate stipends, research equipment, direct costs of experimentation and data collection, project/collaboration planning and development travels, and other costs that are consistent with launching a sustainable research program. Funds can be accumulated across the three years, but expire at the end of the third year.

Planning and accountability:

- a. Funds will be made available each year according to a written plan and budget of research and fund raising which has a horizon through at least the 3rd year of employment and has been approved by the Department Head. The second year and third year plans should also include a report on the preceding year's progress relative to the planned objectives and describe adjustments needed to the plan.
- b. The first distribution of SDAES funds will be made after both projects have been reviewed and accepted by the granting agency. The three year period for start-up funds will be calculated from the start date of the last approved project.

Year 1		
NRM Dept.	\$5000	Office, lab space, computer and printer. Committed 3 year 12 month MS GTA funding (~ \$54k annually). This funding can occur anytime within first 5 years. Commitment from NRM departmental allocation of AES funds to support a 3 year 12 month MS GRA (~ \$54k annually) within the first 5 years once AES projects are approved.
AES TOTAL	\$33,300	Available once AES projects are approved and within first 3 years, \$25,000. Plus, one month of faculty summer salary ~ \$8300.
Year 2		
NRM Dept.	\$5000	
AES TOTAL	\$33,300	Available once AES projects are approved and within first 3 years, \$25,000. Plus, one month of faculty summer salary ~ \$8300.
Year 3		
NRM Dept.	\$5000	
AES TOTAL	\$33,300	Available once AES projects are approved and within first 3 years, \$25,000. Plus, one month of faculty summer salary ~ \$8300.

- 6. Verification of Credentials. Upon the request of the South Dakota State University, Appointee agrees to have sent to the South Dakota State University, upon its request, certified copies of any transcript(s) reflecting the award of degree(s) listed as received on the Appointee's curriculum vitae. Appointee further agrees to provide to the South Dakota State University, upon its request, evidence of employability as required by the United States Immigration Laws. Appointee agrees that the employment of Appointee is terminable by the South Dakota State University if at any time Appointee fails to provide such evidence.
- 7. Controlling Law. This expectation document shall be construed according to the laws of the State of South Dakota.

Start-up support approved by:

Justin Werkmeister

9/3/2020 | 14:54 CDT

Justin Werkmeister

.01

Date

Director of Finance, CAFES

I have read, understand and accept all the expectations of my employment as outlined:

--- DocuSigned by:

Alison Coulter

9/8/2020 | 08:05 CDT

Signature of Appointee

Date

cc:

Human Resources

Dean Killefer

Associate Dean Gibbons

Interim Associate Dean Mistry

NRM Department Head Michele Dudash

Encl: College/Departmental Expectations Document

When Application and Authorization sections	Please check one:		
are completed, please submit the original to:	State Transfer (SDCL 3-9-9)		
State Board of Finance	Full-time continuous employment for 6 months.		
Office of Secretary of State	Professional Recruitment (SDCL 3-9-12)	
500 E Capitol Ave		of employment and of payment of	
PLEASE NOTE: The request and all supporting documentation	moving expenses.	a of the County - of State up	
later than 5:00 p.m. CT eight days prior to the Board	of Finance meeting on the th	urd Tuesday of the month	
Documentation received after that time will be processed at t			
comply with Bureau of Human Resources policies regarding pro			
Appli	ication		
Brianna Kratz	Residence Hall Director	SDSU Housing & Residential Life	
Name of Applicant	New Position Title	Agency Employed By	
\$35,568 Milwaukee, WI	Brookings, SD	August, 2020	
Yearly Salary City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move	
006117	August 10, 2020		
Bureau of Human Resources Class Code	Employment Date with the State		
Bureau of Human Resources Class Code	•		
I understand that household moving allowance is consideresponsible for all applicable payroll taxes. I know I may contact Signature of Applicant			
Author	rization		
The undersigned agent hereby certifies that the above individe that the agency ordered the applicant to move as indicated, and the Agent further declares that, to the best of the Agent's knowled of actual household moving expenses are true and correct.	dual is employed in a full-time pos nat the move will be for the benefit	of the State of South Dakota.	
Christina M. Kaberline	Associate Director House	sing & Residential Life	
Varine of Authorized/Agent	Position/ Title of Authorized Agent		
Why M M. (August 4, 2020	SDSU Housing & Residential Life		
Signature of Authorized Agent Date	Agency of Authorized Agent		
Approval by State Approval of Finance on Date Signature	Board of Finance		

DocuSign Envelope ID: 42883CCA-28C5-4C28-B455-2BE0F4C702F9



SOUTH DAKOTA STATE UNIVERSITY

Housing and Residential Life

MEMORANDUM

DATE:

August 4, 2020

TO:

Brianna Kratz

FROM:

Chris Kaberline, Associate Director Housing & Residential Life

South Dakota State University

RE:

Appointment with Housing and Residential Life, South Dakota State University

On the behalf of South Dakota State University (SDSU), I am pleased to offer you, subject to approval by the [Board of Regents / President], an appointment as a Residence Hall Director in the Housing & Residential Life Department. The effective date of this appointment is August 10, 2020. Annual appointment dates are June 22, 2020 to June 21, 2021. Your salary is \$35,568 based on 12 months at 100% time. Brian Dominguez is your direct supervisor. As with all employees, you will be evaluated annually.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. As denoted in SDBOR Policy 4:34, the SDBOR manages employee-created intellectual property. The provisions of this policy are enclosed. In addition to the intellectual properties, and in accordance with SDBOR Policy 4:35 on conflicts of interest, there is also enclosed a conflict of interest form that you must complete in full. Please review the policies and forms, sign the forms where indicated, and return the forms fully executed with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the SDBOR and of SDSU. This offer is contingent on SDSU's verification of credentials and other information required by law and/or SDBOR and SDSU policies, including but not limited to a criminal background check. Withholding statements (W-4's) and United States employment eligibility verification documents (I-9) are available from the Payroll Office. Your portion of these forms must be completed on or before your first day of employment. The SDBOR requires direct deposit of payroll checks for all employees.

As a Residence Hall Director your position is eligible for state benefits to include household moving allowance of up to \$750 as outlined in SDCL 3-9-12. A Household Moving Allowance form and instructions have been enclosed.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and dating below and returning this signed memo[, a signed copy of the enclosed Agreement to Assign Intellectual Property, and a signed copy of the Conflict of Interest Form to my attention no later than Friday, August 7, 2020, retaining a copy of these documents for your records.

Brianna, we are very excited to have you formally join the SDSU Housing & Residential Life team. I am confident that you will complement the very dedicated staff already in place, as well as, make significant contributions to the growth of our program. Please do not hesitate to contact me if we can answer any questions or be of help as you make your transition.

Sincerely,

Christina M. Kaberline

Chustina Mikutale

Associate Director of Housing & Residential Life

cc:

Brian Dominguez, supervisor

Human Resources

I accept the job offer outlined above.

Brianna terata,

8/4/2020 | 08:42 PDT

Stg#attave De Appointee & Date Signed

Encl: Intellectual Property Policy and Intellectual Property Form

Conflict of Interest Policy and Form

Household Moving Allowance Form & Instructions

When Application and	Authorization sections	Please check one:			
are completed, please	submit the original to:	State Transfer (SDCL 3-9-9)			
State Board of Finance		Full-time continuous employment for 6 months.			
Office of Secretary of S	tatc	Professional Recruitment (SDCL 3-9-12)		
500 E Capitol Ave			of employment and of payment of		
Pierre SD 57501	Phone: 605-773-3537	moving expenses.			
PLEASE NOTE: The	request and all supporting documents	tion must be received in the Offic	e of the Secretary of State no		
Documentation received	CT eight days prior to the Boar d after that time will be processed at	the part Pond of Finance meeting	hird Tuesday of the month.		
comply with Bureau of	Human Resources policies regarding pr	meetion of personally identifiable is	nformation		
		lication	MOTHER HOLE.		
Austin Heddon		Residence Hall Director	SDSU - HRL		
Name of Applicant		New Position Title	Agency Employed By		
\$35,586	Boise, ID & Warrensburg,MO	Brookings, SD	July/August/2020		
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move		
00547		August 4, 2020			
Bureau of Human Resou	rces Class Code	Employment Date with the State			
I homby seguest					
expenses subject to the	uthorization and approval to submi limitations established by South D	t a voucher for reimbursement	of actual household moving		
household moving expen	ses.	akota law, I shall attach to said	voucher evidence of actual		
6					
I understand that he	ousehold moving allowance is consi	dered taxable income according to	o IRS regulations, and I am		
responsible for all applica	ible payroll taxes. I know I may contac	t my agency's finance officer for op-	tions.		
1	11 11	11			
Austri	Heddon	7/30/2020)		
Signature of Applicant	Tagaco 1	Date			
- Burne of Apprount		Date			
	4.3				
	Autho	rization			
The understaned am	ent hereby certifies that the above indiv	idual is appalaued in a full single	at an artist of a state of		
that the agency ordered t	he applicant to move as indicated, and	hat the maye will be for the bonefit	tion with the above agency,		
The Agent further declar	es that, to the best of the Agent's know	ledge and belief, the request and anti-	or the State of South Dakota.		
of actual household movi	ing expenses are true and correct.		ionzadon for remibulsement		
Christina M. Kab	erline	Associate Director, SI	DSU HRL		
Name of Authorized Age	nt O	Position/ Title of Authorized Agen			
Vatra Traket	1, 7/29/2020	South Dakota State U			
Signature of Authorized			TIIVEISILY/FIKL		
Digitature of Authorized	Agent	Agency of Authorized Agent			
	A	D L CD'			
	Approval by State	Board of Finance			
Approved by the State					
Board of Finance on					
I	Date Signatur	e of Secretary, State Board of Finance	ce		



MEMORANDUM

DATE:

July 29, 2020

TO:

Austin Heddon

FROM:

Chris Kaberline, Associate Director Housing & Residential Life

South Dakota State University

RE:

Appointment with Housing and Residential Life, South Dakota State University

On the behalf of South Dakota State University (SDSU), I am pleased to offer you, subject to approval by the [Board of Regents / President], an appointment as a Residence Hall Director in the Housing & Residential Life Department. The effective date of this appointment is August 4, 2020. Annual appointment dates are June 22, 2020 to June 21, 2020. Your salary is \$35,568 based on 12 months at 100% time. Maggie Miller is your direct supervisor. As with all employees, you will be evaluated annually.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. As denoted in SDBOR Policy 4:34, the SDBOR manages employee-created intellectual property. The provisions of this policy are enclosed. In addition to the intellectual properties, and in accordance with SDBOR Policy 4:35 on conflicts of interest, there is also enclosed a conflict of interest form that you must complete in full. Please review the policies and forms, sign the forms where indicated, and return the forms fully executed with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the SDBOR and of SDSU. This offer is contingent on SDSU's verification of credentials and other information required by law and/or SDBOR and SDSU policies, including but not limited to a criminal background check. Withholding statements (W-4's) and United States employment eligibility verification documents (I-9) are available from the Payroll Office. Your portion of these forms must be completed on or before your first day of employment. The SDBOR requires direct deposit of payroll checks for all employees.

As a Residence Hall Director your position is eligible for state benefits to include household moving allowance of up to \$750 as outlined in SDCL 3-9-12. A Household Moving Allowance form and instructions have been enclosed.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and dating below and returning this signed memo[, a signed copy of the enclosed Agreement to Assign Intellectual Property, and a signed copy of the Conflict of Interest Form to my attention no later than Saturday, August 1, 2020, retaining a copy of these documents for your records.

Austin, we are very excited to have you formally join the SDSU Housing & Residential Life team. I am confident that you will complement the very dedicated staff already in place, as well as, make significant contributions to the growth of our program. Please do not hesitate to contact me if we can answer any questions or be of help as you make your transition.

Sincerely,

Christina M. Kaberline

Chustina Takuta Q.

Associate Director of Housing & Residential Life

cc:

Maggie Miller, supervisor

Human Resources

I accept the job offer outlined above.

Austin Heddon 7/30/20 Signature of Appointee & Date Signed

Encl: Intellectual Property Policy and Intellectual Property Form

Conflict of Interest Policy and Form

Household Moving Allowance Form & Instructions

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

Office of Secretary of State Capitol Building - 500 E Capitol Ave Pierre, SD 57501 Phone: 605-773-3537

Anul'
Date: September 7,2020 Agency (-000)
Agency Address: 711 & Wells 19 Agency: 270810
Agency Phone Number: 605-773-4633
Employee Requesting Point
Total Amount of Reimburganant
Date(s) of Hosting Expense: Ale 28 2222 h
Explanation of official business performed: GOED hosted YN
The dat locating in the State for Crimpanies
IN THACK I'M COLL
for the 3 Attendors
I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were expenses were incurred through necessary duties of my employment with the Grant activity. I certify that the state's interests, concerns and activity.
incurred while hosting a prospect for business development, trade, or a tourism promotional activity. I certify that the of perjury that this claim has a
expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true.
of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and
Clare of the and
Signature of Employee September 7 200
Date
Lhereby certified and Authorization
their employment the above employee was authorized to
their employment on behalf of the State of South Dakota. I attest that the employee's claims were in the furtherance of state Steve We stee
The character of state
Ommission of Department/Office Head
Position/Title of Agency Official
Partment/Office Head
Approval Date: State Board of Finance Approval
Note: When completed, attach the original form and receipts to your
Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.
to be sent to the State Auditor's Office.

FAMILY FARE.

KEEPING IT REAL

Store #3253 (605) 343-4326 1516 E SAINT PATRICK ST, RAPID CITY SD Friday, 08/28/20 Your Cashier is:CONNIE 2:34 PM 3.00 B NV GRNLA MX CHO Res Price 4.89 RITZ W/CHZ SNG SRV You Saved 3.19 B Reg Price 3.99 You Saved DASANI 24/500ML BT 4.99 B Reg Price 5.99 You Saved 1.00 KARS SWEET N SALTY 3.49 B .66 . 29 Tax .95 Total 15.62 Debit 15.62 Acct # **********4730 CHIP Purchase PIN Verified Application Label: US DEBIT AID: A0000000980840 TVR: 8080048000 IAD: 06010A03A00000 TSI: 6800 ARC: 00 Authorization # 1139 CHANGE .00

08/28/20 14:34 Good Afternoon Lane 003 Cashier 237375 Store 3253 Trx 111

TOTAL SAVINGS 3.69

Today's yes Summary

Lifetime Savings

701.62

Direct Your Dollars
This ENTIRE receipt needs to

be turned in to your favorite non-profit group with a 501C3# and help them earn \$1000 Questions:Email directyourdollars@spartannash.com Details:www.SpartanNash.com Corporate Responsibility page.

You have earned in eligible Direct Your Dollars purchases. Direct Your Dollars is a community support program for over 140 SpartanNash corporate owned stores.

Join our team!
We offer careers where you'll learn,
grow and thrive. That's why
SpartanNash is a cut above the rest.
careers.spartannash.com

Club/Rewards Status

Your feedback matters! For a chance to

WIN A \$100 GIFT CARD 30 WINNERS EACH MONTH

Tell us about this visit!

mygroceryfeedback.com

Hablamos Espanol:

supermercadoencuesta.com

or Telephone/Telefono

Toll-free 1-866-364-0813
Survey number appears below
713253202411434003
Valid for 7 days from visit

Valid for 7 days from visit
Open to all ages 18+ per the
official rules listed at
mygroceryfeedback.com

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Visit ShopTheFastLane.com Today!

ELIGIBLE FUEL DISC BASKET TTL 14.67 WWW.SHOPFAMILYFARE.COM

Arbys #7940 Oacoma, SD 57365 605-734-0400

8/31/2020 2:11:42 PM TAKE OUT umber: 141

Order Number:

1	B&C SCM Sm Curly		7.19
	Sm Coke		
1	B&C-Double SCM Sm Curly		8.79
	Sm Coke		
1	Greek Gyro MCM		7.59
	Md Curly Md Coke		
1			F 00
!	Ckn Club Wrap		5.99
1	Sm Coke		1.79
	Sub. Total:	7-4-	\$31.35
	Tax:		\$2.35
	Total:		
			\$33.70
	Discount Total:		\$0.00
	Master Card:	6	\$33.70
	Change		\$0.00
Re	gister:1	Tran Seg No:	234141
	shier:One C.	riun ocq no.	234141
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	and the second s		

Master Card

Card Num : XXXXXXXXXXXXX5305 Terminal: JD46047304001

Approval: 20639P Sequence: 040433

I agree to pay the above Total Amount according to Card Issuer Agreement.

. Signature:

(A)

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501

Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application
Date: 9/24/20
Agency: DWRGW
Agency Address: 112 WEIS AVE. PIERRE SD 57501
Agency Phone Number: (1005) 773- 3301
Employee Requesting Reimbursement:
Total Amount of Reimbursement:
Date(s) of Hosting Expense:
Receipts Attached: (Y)/N
Explanation of official business performed: HOSTED YOURNALISTS IN CUSTOR WINTE
Visiting an a press trip for Bonffald Roundup
I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while hosting a present for him the voucher attached hereto, that were
incurred while hosting a prospect for business development, trade, or a tourism promotional activity. I certify that the expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of state's interests, concerns, and activities and are supported by the attached receipts. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and Signature of Employee
Authorization
I hereby certify that the above employee was authorized to incur the claimed expenses while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's claims were in the furtherance of state interests relating to hosting a prospect for business development, trade, or a tourism promotional activity.
Name of Department/Office Head Name of Department/Office Head Position/Title of Agency Official
Name of Department/Office Head Position/Title of Agency Official 9.29.29.20
Signature of Department/Office Head Date
State Board of Finance Approval
Approval Date:
Signature of Secretary State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.

Bîack Hills Burger & Bun Co. 441 Mt. Rushmore Rd Custer, South Dakota 57730 605-673-3411

September 24, 2020 6:55pm

Ticket: 2009240170 Server: Peg R Seat: ToGo:ToGo:1

Item	Price	
1 The Hot Granny 1 The Hot Granny 1 The Hot Granny NO Jalapenos	10.65T 10.65T 10.65T	
1 Texan	10.65T	
Subtotal	42.60	
Sales Tax 2016 (7.5%)	3.20	
Total	\$45.80	
American Express Amount Due	\$-45.80 \$0.00	

Tip Helper: 15%=6.87 20%=9.16 25%=11.45

Thank You For Your Business!

Mt. Rushmore Brewing Company 140 Mount Rushmore Road Custer, SD 57730 (605) 673-4200

September 24, 2020 8:01pm

Ticket: 2009240189 Server: CRISTHIAN M Seat: ToGo:ToGo:1

Item	Price
1 Pounding Burger 1 Beef Regular Fries	0.00T 100.01
Subtotal	10.99
Sales Tax (7.5%)	0.82
Total \$	11.81

Thank you! Please come again soon!

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application
Date: 10.01.2080 Agency Address: 71/ E Wall a Agency: Dept. of Tourism
Agency Address: 71/ E. Wells avenue Dept. of Tourism
Agency Phone Number: 615. 773. 330/
Employee Requesting Reimbursementy James). Have
Total Amount of Reimbursement: 259. //
Date(s) of Hosting Expense: 09. 24. 2020
Explanation of official business performed: (1) Phrehased water for the department's
Palmer from the Jan poment to 11 (1 thrs). (d) James Hagen & Stephan.
travel writers, Ted Stedmen and Nathanael Billings
I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while hosting a prospect for business development, trade, or a tourism promotional activity. I certify that the expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and Signature of Employee Signature of Employee Date
Authorization
I nereby certify that the above employee and the state of
their employment on behalf of the State of South Dakota. I attest that the employee's claims were in the furtherance of state interests relating to hosting a prospect for business development, trade, or a tourism promotional activity.
hather the state of a tolar still promotional activity.
Name of Department/Office Head Name of Department/Office Head Name of Department/Office Head Position/Title of Agency Official
Signature of Department/Office)Head Date Date
Date /0-5-20
State Board of Finance Approval
Approval Date:
Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.
of the State Auditor's Office.

Square automatically sends receipts to the email address you used at any Square seller. Learn more

Skogen Kitchen

How was your experience?

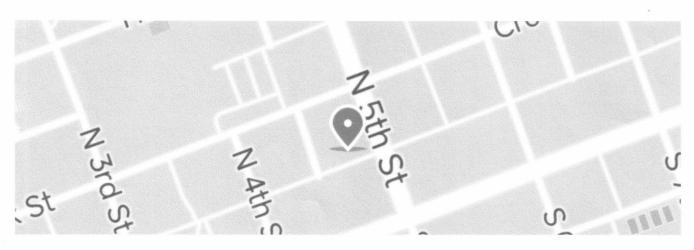




275.41 - 9.00 wine - 10.50 wine 255.91

\$275.41

Custom Amount	\$229.51
Purchase Subtotal	\$229.51
Tip	\$45.90
Total	\$275.41



Skogen Kitchen 29 N 5th street Custer, SD 57730-7218 605-673-2241



AMEX 1004 (Swipe)

JAMES D HAGEN

Sep 24 2020 at 8:26 PM

#zPre

Auth code: 572295



Receipt Settings

Not your receipt? Turn off automatic receipts Manage preferences

© 2020 Square, Inc. Privacy Policy 1455 Market Street, Suite 600 San Francisco, CA 94103

© Mapbox © OpenStreetMap Improve this map



RAPID CITY - 605-341-8620 09/24/2020 02:12 PM EXPIRES 12/23/20

GROCERY	
20360000	1
ZU.3011111111	

ARROWHE PIPO FT

(605) 673-2241 \$3.00 1

SUBTOTAL T = SD TAX 6.5000% on\$3.00

\$3.00 \$0.20

CASH PAYMENT CHANGE DUE

↓ INDICATES SAVINGS

TOTAL SAVINGS THIS TRIP \$0.49

REC#2-0268-2457-0079-1667-2 VCD#750-289-958

Help make your Target Run better. Take a 2 minute survey about today's trip:

informtarget.com User ID: 7973 1754 3992 Password: 083 328

CUÉNTENOS EN ESPAÑOL

Please take this survey within 7 days

Skogen Kitchen

29 N 5th street Custer, SD 57730-7218

Sep 24, 2020 8:26 PM

skogenkitchen.com

Authorization 572295

AmEx 1004

Receipt zPre

Custom Amount

\$229.51

Total

\$229.51

AmEx 1004 (Swipe)

\$229.51

Al	D	D	A	T	ΙP	
VIII OS			600	æ.	ăĒ,	die

☐ 15% (Tip \$34.43, Total \$263.94)

20% (Tip \$45.90, Total \$275.41)

25% (Tip \$57.38, Total \$286.89)

CUSTOM TIP

TOTAL

I agree to pay the above total amount according to my card issuer agreement.

CUSTOMER COPY

\$10.50 \$32.00 \$38.00 \$50.00 \$27.00 \$9.00 \$38.00

\$194.00

\$213.50 Food Total Alcohol Total

\$229.51 Sub Total Sales Tax 7.5

Thank You Please Come Again!

20%=\$42.70 Tip Guide: 15%=\$32.02 10%=\$21.35

Printed from iPad using TouchBistro Pro

Tel: 6056732241 Printed September 24, 2020 at 8:22 PM United States, 57730 Skogen Kitchen 29 N 5th St Custer, SD

September 24, 2020 at 8:22

Order #: 26011

Waiter: Cami

Party Name: 23 Sales Tax 7.5 #: R0123456789 Table: 6, , 4 guests

Gewürztraminer, Baldacci, Frederick Prisma, Sauvignon Blanc, Chile, 6oz

x Seasonal Soup Glass

2 x Carrot Raviolis
3 x Pistachio Gelato
Double Chocolate Tart Halibut

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Applicatio	n
Date: 9/25/20	
Agency Address: Age	ncy: <u>Pept.</u> of <u>Juvisy</u>
Agency Phone Number: Pierre, SO	57501 - 605,773.330
Requesting Reimbursement:	State Park Peso
	44.00
Date(s) of Hosting Expense: 9125120	
Receipts Attached: (Y)N	
Explanation of official business performed: Lunch for	Staff a instant implalists
at Buffalo Foundud	TO STON JUNE 1911
expenses were incurred through necessary duties of my employment state's interests, concerns, and activities and are supported by the att of perjury that this claim has been examined by me, and to the best correct. Signature of Employee	ached receipts. I declare and affirm under the penalties to f my knowledge and belief, is in all things true and Date
Authorizatio I hereby certify that the above employee was authorized to incur the c their employment on behalf of the State of South Dakota. I attest that interests relating to hosting a prospect for business development, trade	laimed expenses while performing necessary duties of
Name of Department/Office Head	Secretary
At Dethan	Position/Title of Agency Official
The state of the s	10.1.20
Signature of Department/Office Head	Date
State Board of Finance	Annroyal
Approval Date:	Approvat
Note: When completed, attach the original form and receipts t	re of Secretary, State Board of Finance o voucher to be sent to the State Auditor's Office.

Custer State Park Resorts Invoice

Date: 09/30/2020

Contact: Katlyn Richter Group Name: SD Tourism Address: 711 East Wells Ave Phone Number: Pierre, SD 57501

Project Number:

Approval #1: VV #2: (2

Date: 9/30/20

Date & Description	Mea	ls	Gr	atuity	39	6	Tot	tal
Friday, September 25, 2020						M1001011010000000000000000000000000000		
8 Lunches @ \$18.00	\$	144.00	\$	0.00	\$	0.00	\$	144.00
· KATUN PICHTER								
· Stephanit Palmer								
· Ciara Rounds								
· Ted Steaman								
Galoritla Hoffman								
Nathaniel Pallinas								
· 2001 lones								
· Jim Hagen								

						·		
					_			

Annual Control of the			-				-	
							_	
							_	
					1		+-	
*	\$	144.00	\$	0.00	\$	0.00	\$	144.00

Journalist meals at the Buffald Roundup meals

When approval for meals was sought for the meeting last Sept. it only included Sped employees and should have also included

Bernie Grimme

Laura Johnson Frame

who are also state employees with a Pierre home station.

Drifters just sent the invoice so it was identified by the finance office at this time.

<u>Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2</u>

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

App	plication
Date: 9/11/20	Agency: DOE - SPED
Agency Address: 800 GOVERNORS	DRIVE
Agency Phone Number: (605) 773 - 3678	's Caisam
Employee Requesting Reimbursement: Linga Tu	ENER, WENDY TRUILLO, KRISTIN JERO
Total Amount of Reimbursement:	
Date(s) of Expense: 9/19/19	
Event Leave Time: 8:00 A	Event Return Time: 4:00 P
Explanation of official business performed: 50	ADVISORY PANEL FOR CHILDREN
WITH DISABILITIES MTG I	DRIFTERS IN FT. PIERRE, SD
WORKING LUNCH	
incurred while conducting state business at my headquarter entirely through a meal time without interruption and include	ent of expenses, set forth in the voucher attached hereto, that were rs station or place of residence. I certify that the event extended ded a meal provision for which I was billed. I declare and affirm upper by me, and to the best of my knowledge and belief is in all
entirely through a meal time without interruption and include under the penalties of perjury that this claim has been exam things true and correct.	rs station or place of residence. I certify that the event extended
entirely through a meal time without interruption and include under the penalties of perjury that this claim has been exam things true and correct.	rs station or place of residence. I certify that the event extended ded a meal provision for which I was billed. I declare and affirm lined by me, and to the best of my knowledge and belief, is in all
incurred while conducting state business at my headquarter entirely through a meal time without interruption and include under the penalties of perjury that this claim has been exampled things true and correct. Signature of Employee Author I hereby certify that the above employee was authorized to in	rs station or place of residence. I certify that the event extended ded a meal provision for which I was billed. I declare and affirm fined by me, and to the best of my knowledge and belief, is in all and to the best of my knowledge and to the
incurred while conducting state business at my headquarter entirely through a meal time without interruption and include under the penalties of perjury that this claim has been exampled things true and correct. Signature of Employee Author I hereby certify that the above employee was authorized to in residence while performing necessary duties of their employeems participation in the event was in the furtherance of the state of	rs station or place of residence. I certify that the event extended ded a meal provision for which I was billed. I declare and affirm fined by me, and to the best of my knowledge and belief, is in all and to the best of my knowledge and to the
incurred while conducting state business at my headquarter entirely through a meal time without interruption and include under the penalties of perjury that this claim has been exampled things true and correct. Signature of Employee Author I hereby certify that the above employee was authorized to in residence while performing necessary duties of their employee	rs station or place of residence. I certify that the event extended ded a meal provision for which I was billed. I declare and affirm fined by me, and to the best of my knowledge and belief, is in all and to the best of my knowledge and to the
Incurred while conducting state business at my headquarter entirely through a meal time without interruption and include under the penalties of perjury that this claim has been exampled the penalties of perjury that this claim has been exampled the penalties of perjury that this claim has been exampled the penalties of the pena	rs station or place of residence. I certify that the event extended ded a meal provision for which I was billed. I declare and affirm fined by me, and to the best of my knowledge and belief, is in all a p-14-2020 Date Orization Discurrence the claimed expenses at their headquarters station or place of syment on behalf of the State of South Dakota. I attest that the of state interests. Position/Title of Agency Official
Incurred while conducting state business at my headquarter entirely through a meal time without interruption and include under the penalties of perjury that this claim has been exampled things true and correct. Signature of Employee Author I hereby certify that the above employee was authorized to in residence while performing necessary duties of their employemployee's participation in the event was in the furtherance of Name of Department/Office Head Signature of Department/Office Head	rs station or place of residence. I certify that the event extended ded a meal provision for which I was billed. I declare and affirm fined by me, and to the best of my knowledge and belief, is in all a p-14-2020 Date Orization I certify that the event extended ded a meal provision for which I was billed. I declare and affirm the first and the state of my knowledge and belief, is in all a p-14-2020 Date Orization For it is in all a p-14-2020 Date Orization For it is in all a p-14-2020 Date Orization For it is in all a p-14-2020 Date Orization For it is in all a p-14-2020 Date Orization For it is in all a p-14-2020 Date Orization Orization For it is in all a p-14-2020 Date Orization For it is in all a p-14-2020 Date

Signature of Secretary, State Board of Finance Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.

Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501

Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable

Application
Date: $9 20 19$ Agency: $D0 \in -SP \in D$
Agency Address: 800 Grenns Drive
Agency Phone Number: 773-31678
Employee Requesting Reimbursement: Lind a Turner, Wendy Tryllo,
Total Amount of Reimbursement: KNShn Ferome
Date(s) of Expense:
Event Leave Time: 8:00 am Event Return Time: 4:00m
Explanation of official business performed:
SD advising Panel for Children with
disobilities mtg - Drifters in F+ Pierre, S
Whiling Ounds
I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. Signature of Employee Date
Authorization
I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's participation in the event was in the furtherance of state interests.
Name of Department/Office Head Name of Department/Office Head Name of Department/Office Head Name of Department/Office Head
Benda Turner 11/11/19 11/20/14
I gonseed kins
Signature of Department/Office Head / Date
Approval Date: Signature of Secretary State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.

Drifters Bar & Grille, Inc. 325 Hustan Avenue Fort Pierre, SD 57532

Statement

Date 8/31/2020

То:

Department of Education Attn: Accts Payable 800 Governors Drive Pierre, SD 57501

				Amount Due	Amount Enc.
	*			\$551.56	
Date		Transaction		Amount	Balance
09/19/2019	INV #2019.09.18. Due 10/19 EC Food Sales, 18 @ \$11 Gratuity \$43.00	/2019. Orig. Amount \$252 61111 = 209.00	252.00	252.00	
	 			** *	
09/19/2019	Tax Exempt \$0.00 INV #2019.09.35. Due 10/19 Projector w/ Screen \$50.00 Room Fee \$175.00	/2019. Orig. Amount \$225)	5.00.	225.00	477.00
08/31/2020	Tax Exempt \$0.00 INV #FC 14. Due 08/31/2020. Orig. Amount \$74.56. Finance Charge Fin Chg \$74.56 Invoice #2019.09.18 for 252.00 on 09/19/2019			74.56	551.56
	Invoice #2019.09.35 for 22			, ,	
	9				
CURRENT	1-30 DAYS PAST	31-60 DAYS PAST	61-90 DAYS PAST	OVER 90 DAYS	
OUNTENT	DUE	DUE	DUE	PAST DUE	Amount Due
74.56	0.00	0.00	0.00	477.00	\$551.56

INVOICE

19 September 2019

Terms: Net 30

Drifters Bar and Grille

325 Hustan Ave Fort Pierre, SD 605.220.5014

SD Department of Education

800 Governors Drive Pierre, SD 605.773.3134

QUANTITY	DETAILS	UNIT PRICE	LINE TOTAL
18	Lunch	14.00	252.00
1	Projector and Screen	50.00	50.00
1	Room Charge	175.00	175.00
	Food and Beverage Tax	7.50%	exempl
	Other Tax	6.50%	exempt
		Final Balance	\$477.00

MEETING DETAILS

OTHER INFORMATION

Event Date: 9/19/19

Event Time: 8:00AM-5:00PM

Event Room: Starboard

Guest Count: 20

An interest fee of 1.5% per month (18% per annum) is assessed on past due accounts.

INVOICE



19 September 2019

Terms: Net 30

252

Drifters Bar and Grille

325 Hustan Ave Fort Pierre, SD 605.220.5014

SD Department of Education

800 Governors Drive Pierre, SD 605.773.3134

QUANTITY	DETAILS	UNIT PRICE	LINE TOTAL
18	Lunch	14.00	252.00
	Food and Beverage Tax	7.50%	exempt
	Other Tax	6.50%	exempt

Final Balance

\$252.00

MEETING DETAILS

OTHER INFORMATION

Event Date: 9/19/19

Event Time: 8:00AM-5:00PM

Event Room: Starboard

Guest Count: 20

An interest fee of 1.5% per month (18% per annum) is assessed on past due accounts.

INVOICE



19 September 2019

Terms: Net 30

225

Drifters Bar and Grille

325 Hustan Ave Fort Pierre, SD 605.220.5014

SD Department of Education

800 Governors Drive Pierre, SD 605.773.3134

QUANTITY	DETAILS	UNIT PRICE	LINE TOTAL
1	Projector and Screen	50.00	50.00
1	Room Charge	175.00	175.00
	Food and Beverage Tax	7.50%	exempt
	Other Tax	6.50%	exempt

Final Balance

\$225.00

MEETING DETAILS

OTHER INFORMATION

Event Date: 9/19/19

Event Time: 8:00AM-5:00PM

Event Room: Starboard

Guest Count: 20

An interest fee of 1.5% per month (18% per annum) is assessed on past due accounts.

Minutes

SD Advisory Panel for Children with Disabilities

Drifter – Ft Pierre, SD September 19th, 2019 from 8:30 to 4:00

Members Present

Erin Schons

MArie Ivers

Bernie Grimme

Stephanie Caron

Steve Helgeland

Heather Trefz

Brad Otten

Peggy Waltner

Jennifer Carda

Laura Johnson Frame

Kim Wadsworth

Larry Puthoff

<u>Absent</u>

Larry Ayres

Nicole Bacan

Kristi Eisenbraun

Dr Laura Johnson

DOE Staff

Wendy Trujillo

Linda Turner

Kristin Jerome

TAESE

Mark Gabrylczyk

Call to order 8:39 am

Approval of Agenda Motion Marie Ivers 2nd Steve Helgeland

Approval of Minutes Motion Peggy Waltner 2nd Brad Otten

Election of Officers
Chairperson – nominated – Erin Schons
Vice Chairperson – nominated – Larry Ayres
Motion to close nominations Linda Turner
2nd Bernie Grimmes
Motion for nomination carried

DOE Updates

Linda Turner discussed the Report Card and what is indicated on it. Laura Johnson Frame contributed some information as well. Report Card posted online.

Linda explained that we had a data retreat to help decide what we need to do each year going forward. PD days and other areas to assist with improved outcomes.

The title committee also assists with this.

Sped Ed interim committee met last month, financial costs and out of district placements and they will draft some recommendations. If they recommend legislation they will report to the next committee to move forward. In the next months we will know what they are recommending. Bills are starting to come together for 2020 legislature. Next time we will have those updaters.

Week of work for 10th grade students to do internships is now happening. New inniative.

Monitoring cycle, 5 year monitoring review going on right now. RDA is being incorporated. not just compliance.

State wide assessment, new this year, the science review panel in october. New platform they will be testing on.

Interagency agreement review

Linda Turner presenting

Agreement with BOR School for the Deaf and outreach services Due in 2020. DOC agreements 2017 last review next May 2020. DSS 2020 review. . . . DHS, DOL In January will have some more info. Early Childhood and Birth to 3, being worked on right now.

South Dakota Advisory Panel on Children with Disabilities AGENDA

Drifters Conference Center: 325 Hustan Ave, Fort Pierre, SD 57532 September 19, 2019 8:30am – 4pm CT

LINDA

Knsha Enh Manie

Stephanie

Heatne

Jennifer

Kim Lami F

TOESE Mark

Panel Functions:

- Advise the SEA of unmet needs within the State in the education of children with disabilities
- Comment publicly on any rules or regulations proposed by the state regarding the education of children with disabilities
- Advise the SEA in developing evaluations and reporting on data to the Secretary under section
 618 of the Act
- Advise the SEA in developing corrective action plans to address findings identified in Federal monitoring reports under Part B of the Act
- Advise the SEA in developing and implementing policies relating to the coordination of services for children with disabilities
- Review and comment on final due process hearing findings and decisions
- Advise on eligible students with disabilities in adult prisons- The advisory panel also shall advise
 on the education of eligible students with disabilities who have been convicted as adults and
 incarcerated in adult prisons

Panel Priorities:

Parental Awareness of Rights and Procedural Safeguards

Agenda:

Agenda Item	Presenter	Documents
Call meeting to order and	Chairperson – Erin Schons	Call to order
Introductions		8:39
Approval of the agenda	Advisory Panel	Agenda Motion Wane
		2nd Steve
Approval of the minutes	Advisory Panel	motion Com Peggy
		,2nd Brad
Public Comment		ding public comment, please send
	notification to Wendy.Trujillo	@state.sd.us or call (605)773.3678
Election of Officers	Advisory Panel Cha	in Enn motion mane
	Me "	(arry motion marie)
		a ind an ind

Agenda Items Cont	Presenter	Documents
Department of Education Updates	Linda Turner Wendy Trujillo	
Interagency Agreement Reviews	Linda Turner	Interagency Agreements
Dispute Resolution Report 18- 19	Wendy Trujillo	Handout
Annual Report	Wendy Trujillo	
Advisory Panel Orientation	TAESE	1-1.5 hours
Lunch (11:45) 12:15		Drifters Conference Center
Personal Assistant Rate Approval	Wendy Trujillo	notion mar
Priority Area: Setting new priority	TAESE Advisory Panel	2.5-3 hours
Meeting Take Away for Annual Report	Advisory Panel	
Next Meeting and Agenda Items	Advisory Panel	Total State of the Control of the Co

If you require a reasonable accommodation to participate in the meeting (e.g. sign language interpreter, materials in an alternative format), please submit your request in writing no later than 10 days prior to the meeting to ensure accommodations are available. Address requests to Kristin.Jerome@state.sd.us or call 605-773-3678.

enal interpreter into for provided ones for Lange give her the black box & folders.

Payment Request

Division	DESS	4.016				Date	11/07/20)19
Vendor Na	me	Drifters Bar a	and Grille					je ^s e
Vendor Address 325 Hustan Ave Ft. Pie				erre, SD 5753	2	201		No.
Contract Number			Auditor No	umber				
Partial Final								
Service Dates of Contract Invoice								
Descriptio	EXPENSE	ed goods and s S Working lun	ervices: ich for SD A	dvisory Panel	for Child	ren with	Disabilities Mee	oting
	3 12 1				Fund	Sub		
1099 Cod	•		LBYIGY		Source		Expense A	-252.00
	2024	52031	30 09	1232 830	K03	A0	70.10C	-232.00
					T	otal	561.54	2 52.00
Person to	Contact al	bout Request		Lindsey Bon	nesberge	r (SpEd)		
			Car Kill 1	Approval			Markey	1 mm
Progr	ram Staff	Junda /www Office Administr	rei	11.12.15 ision Director	Grants M	anagemer	t Contract Mai	nager
		Account	ting and Fir	nancial Repo	rting Use	Only)	
Vendor ID	12	-546339	7	Invoice N	Number	12018	MOONAAA	ara'



SOUTH DAKOTA DEPARTMENT OF AGRICULTURE

OFFICE OF THE SECRETARY

523 East Capitol Avenue Pierre, SD 57501 Phone: 605.773.5425 Fax: 605.773.5926 sdda.sd.gov

October 8, 2020

SD State Auditor's Office 500 East Capitol Avenue Pierre, SD 57501

To: Board of Finance

RE: Request to cover costs of unoccupied hotel rooms during the State Fair.

The South Dakota Department of Agriculture annually books hotel rooms one year in advance of the State Fair to ensure state government staff have local lodging while working.

In 2019 the Department of Agriculture's special projects coordinator, Tiffany Thompson, attempted to secure rooms at two locations the Crossroads and the Quality Inn of Huron. The Crossroads guaranteed rooms for state employees, but as usual the Quality Inn wouldn't commit.

In September 2020, due to all the uncertainties surrounding hosting the State Fair during COVID-19, the Quality Inn had more cancellations than usual. They informed SDDA on Monday of State Fair week that additional rooms would be available for state employees.

SDDA then had to decide whether to hold additional rooms at the Quality Inn or give them up. The Quality Inn still had requirements for cancellations and "no show" charges. On the Monday of State Fair week SDDA was still short approximately 40 workers for staffing all shift work needed at the Fair.

SDDA elected to secure several rooms at the Quality Inn for Wednesday night through Sunday night of the Fair. Later on Wednesday, the first night of the Fair, with a clearer picture of staffing needs, SDDA cancelled all the rooms at the Quality Inn. However, cancellation fees from the Quality billed all rooms for Wednesday night, but no charges for the remaining nights.

SDDA is asking approval from the Board of Finance to cover the Wednesday night charges billed by the Quality Inn. Thank you for your consideration.

Chris Petersen

Chris Petersen Finance Officer GFP and SDDA



100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

SD DEPT OF AGRICULTURE A/R ACCT#

215

THOMPSIN, TIFFANY

2011 buffalo st

57501

Account: 672273456

Date: 9/21/20

Room: 208 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 5:39 PM

Check Out Time: 9/2/20 5:42 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud Total Balance Due: 0.00

37301			
		Comment	i valt and
9/2/20	Visa Payment	THE RESIDENCE OF THE PROPERTY	(140.00)
		XXXXXXXXXXX4903	
9/2/20	Visa Payment	Adjustment	140.00
		XXXXXXXXXXX4903	
9/2/20	No Show Charge	NO SHOW CHARGES	140.00
9/2/20	State Tax		6.30
9/2/20	City / County Tax		2.80
9/2/20	Occupancy Tax		2.00
9/2/20	City / County Tax	Tax Exemption Refund	(2.80)
9/2/20	Occupancy Tax	Tax Exemption Refund	(2.00)
9/2/20	State Tax	Tax Exemption Refund	(6.30)
9/2/20	Direct Bill		(140.00)
		Felio Summary 9/2/20 - 9/2/20	
	No Show Charge		140.00
	State Tax		0.00
	City / County Tax		0.00
	Occupancy Tax		0.00
	Direct Bill		(140.00)
	Visa Payment		0.00
		Balance Due:	0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(140.00) will be billed to: Account 1043958

SD DEPT OF AGRICULTURE A/R ACCT# 215, 523 EAST CAPITOL AVE , PIERRE, SD 57501





100 21st Street SW Huron, SD 57350 (605) 352-6655 GM.SD070@choicehotels.com Account: 672273466 Date: 9/21/20

Room: 204 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20 Check In Time: 9/2/20 5:44 PM

Check Out Time: 9/2/20 5:44 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud Total Balance Due: 0.00

PRO AG SUPPLY THOMPSIN, TIFFANY 2011 buffalo st 57501

 Post Date
 Description
 Comment
 Amend

 9/2/20
 No Show Charge
 140.00

 9/2/20
 Direct Bill
 (140.00)

E E O E STIGNED DE L'ESTE DE BERRO

No Show Charge Direct Bill 140.00 (140.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(140.00) will be billed to: Account 1043958
PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SD
57501





100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

PRO AG SUPPLY
THOMPSIN, TIFFANY
2011 buffalo st

57501

Account: 672273467

Date: 9/21/20

Room: 214 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 5:46 PM

Check Out Time: 9/2/20 5:47 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud

Total Balance Due: 0.00

9/2/20 9/2/20 No Show Charge

Direct Bill

140.00

(140.00)

No Show Charge

Direct Bill

140.00 (140.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards,

(140.00) will be billed to: Account 1043958

PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SC 57501





100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

Account: 672273468

Date: 9/21/20

Room: 224 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 5:48 PM

Check Out Time: 9/2/20 5:49 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud Total Balance Due: 0.00

2011 buffalo st 57501

THOMPSIN, TIFFANY

PRO AG SUPPLY

 9/2/20
 No Show Charge
 140.00

 9/2/20
 Direct Bill
 (140.00)

Folio Eurania y 9/2/20 - 9/2/20

No Show Charge

Direct Bill

140.00 (140.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(140.00) will be billed to: Account 1043958

PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SC 57501





100 21st Street SW Huron, SD 57350 (605) 352-6655 GM.SD070@choicehotels.com Account: 672273469

Date: 9/21/20

Room: 225 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20 Check In Time: 9/2/20 5:50 PM

Check Out Time: 9/2/20 5:51 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud

Total Balance Due: 0.00

THOMPSIN, TIFFANY 2011 buffalo st 57501

PRO AG SUPPLY

	Commant Commant	ich in der
9/2/20	No Show Charge	140.00
9/2/20	Direct Bill	(140.00)

Follo Strainery 9/2/20 9/2/20

No Show Charge Direct Bill 140.00 (140.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(140.00) will be billed to: Account 1043958

PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SD 57501





100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

PRO AG SUPPLY THOMPSIN, TIFFANY 2011 buffalo st Account: 672273471

Date: 9/21/20

Room: 214 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 5:52 PM

Check Out Time: 9/2/20 5:53 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud Total Balance Due: 0.00

		Comment - Samplini
9/2/20	No Show Charge	140.00

3/2/20

No Show Charge

(140.00)

9/2/20

57501

Direct Bill

Summary 9/2/20 - 9/2/20

No Show Charge

Direct Bill

140.00

Balance Due:

(140.00) 0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(140.00) will be billed to: Account 1043958

PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SD 57501





PRO AG SUPPLY

2011 buffalo st

THOMPSIN, TIFFANY

Quality Inn (SD070)

100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

Account: 672273472

Date: 9/21/20

Room: 135 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 5:54 PM

Check Out Time: 9/2/20 5:55 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud

Total Balance Due: 0.00

9/2/20 9/2/20

57501

No Show Charge

Direct Bill

155.00

(155.00)

No Show Charge

Direct Bill

155.00 (155.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(155.00) will be billed to: Account 1043958

PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SD





57501

Quality Inn (SD070)

100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

PRO AG SUPPLY THOMPSIN, TIFFANY 2011 buffalo st Account: 672273860

Date: 9/21/20

Room: 208 BAR

NOOIII. 200 BA

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 6:03 PM

Check Out Time: 9/2/20 6:04 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud

Total Balance Due: 0.00

	Comment Comment	
9/2/20	No Show Charge	140.00
9/2/20	Direct Bill	(140.00)

. Fair publishmen istrick var 200

No Show Charge

Direct Bill

140.00 (140.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(140.00) will be billed to: Account 1043958
PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SD
57501





100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

PRO AG SUPPLY THOMPSIN, TIFFANY 2011 buffalo st 57501

Account: 672273901

Date: 9/21/20

Room: 227 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 6:05 PM

Check Out Time: 9/2/20 6:05 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud Total Balance Due: 0.00

	Description Comment Comment	Avacord
9/2/20	No Show Charge	140.00
9/2/20	Direct Bill	(140.00)

No Show Charge 140.00 Direct Bill (140.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

> (140.00) will be billed to: Account 1043958 PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SC 57501





100 21st Street SW Huron, SD 57350 (605) 352-6655 GM.SD070@choicehotels.com Account: 672273902

Date: 9/21/20

Room: 225 BAR

Arrival Date: 9/2/20 Departure Date: 9/2/20

Check In Time: 9/2/20 6:06 PM

Check Out Time: 9/2/20 6:07 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud Total Balance Due: 0.00

PRO AG SUPPLY THOMPSIN, TIFFANY 2011 buffalo st

9/2/20

140.00

9/2/20

57501

No Show Charge

(140.00)

Direct Bill

No Show Charge

140.00

Direct Bill

(140.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

> (140.00) will be billed to: Account 1043958 PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SC





100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

Account: 722074337

Date: 9/21/20

Room: 204 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 6:12 PM

Check Out Time: 9/2/20 6:13 PM

Rewards Program ID:

You were checked out by: vchaud You were checked in by: vchaud Total Balance Due: 0.00

2011 buffalo st 57501

THOMPSIN, TIFFANY

PRO AG SUPPLY

 Post Offer
 Comment
 Comment
 Actions

 9/2/20
 No Show Charge
 140.00

 9/2/20
 Direct Bill
 (140.00)

F6 (5 Strome y 8)2/2(1.9/2/2)

No Show Charge

Direct Bill

140.00

Balance Due:

(140.00) 0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(140.00) will be billed to: Account 1043958 PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SD 57501





100 21st Street SW Huron, SD 57350

(605) 352-6655

GM.SD070@choicehotels.com

Account: 722074701

Date: 9/21/20

Room: 135 BAR

Arrival Date: 9/2/20

Departure Date: 9/2/20

Check In Time: 9/2/20 6:15 PM

Check Out Time: 9/2/20 6:15 PM

Rewards Program ID:

You were checked out by: vchaud

You were checked in by: vchaud

Total Balance Due: 0.00

PRO AG SUPPLY THOMPSIN, TIFFANY 2011 buffalo st

Page Date Description Comment.

9/2/20 No Show Charge

155.00

9/2/20

57501

Direct Bill

(155.00)

No Show Charge

Direct Bill

155.00

(155.00)

Balance Due:

0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(155.00) will be billed to: Account 1043958

PRO AG SUPPLY, 523 EAST CAPITOL AVE , PIERRE, SC

57501





100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

Account: 686191147

Date: 9/21/20

Room: 118 BAR

Arrival Date: 9/2/20

Departure Date: 9/7/20

Check In Time:

Check Out Time:

Rewards Program ID:

You were checked out by:

You were checked in by:

Total Balance Due: 0.00

SD DEPT OF AGRICULTURE A/R ACCT#

215

robert, Shart

3615 Canyon Lake Drive Ste. 1

Rapid City, SD 57702

		Comment 1 Year 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
9/3/20	No Show Charge		169.99
9/3/20	State Tax		7.65
9/3/20	City / County Tax		3.40
9/3/20	Occupancy Tax		2.00
9/3/20	City / County Tax	Tax Exemption Refund	(3.40)
9/3/20	Occupancy Tax	Tax Exemption Refund	(2.00)
9/3/20	State Tax	Tax Exemption Refund	(7.65)
9/3/20	Direct Bill		(169.99)

Folio Summary 8/3/20 - 9/3/20	
No Show Charge	169.99
State Tax	0.00
City / County Tax	0.00
Occupancy Tax	0.00
Direct Bill	(169.99)
Balance Due:	0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards,

(169.99) will be billed to: Account 1043958

SD DEPT OF AGRICULTURE A/R ACCT# 215, 523 EAST CAPITOL AVE , PIERRE, SD 57501





100 21st Street SW Huron, SD 57350 (605) 352-6655

GM.SD070@choicehotels.com

Account: 686191157

Date: 9/21/20

Room: 218 BAR

Arrival Date: 9/2/20

Departure Date: 9/7/20

Check In Time:

Check Out Time:

Rewards Program ID:

You were checked out by:

You were checked in by:

Total Balance Due: 0.00

SD DEPT OF AGRICULTURE A/R ACCT#

215

robert, Shart

3615 Canyon Lake Drive Ste. 1

Rapid City, SD 57702

9/3/20 No Show Charge 169.99 9/3/20 7.65 State Tax 9/3/20 City / County Tax 3.40 9/3/20 Occupancy Tax 2.00 9/3/20 City / County Tax Tax Exemption Refund (3.40)9/3/20 Tax Exemption Refund (2.00)Occupancy Tax 9/3/20 State Tax Tax Exemption Refund (7.65)9/3/20 Direct Bill (169.99)

Fill's Summary 9(3)20 - 9(5)26	
No Show Charge	169.99
State Tax	0.00
City / County Tax	0.00
Occupancy Tax	0.00
Direct Bill	(169.99)
Balance Due:	0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

(169.99) will be billed to: Account 1043958

SD DEPT OF AGRICULTURE A/R ACCT# 215, 523 EAST CAPITOL AVE , PIERRE, SD 57501





DATE: October 13, 2020

TO: State Board of Finance

FROM: Tamara Darnall, Chief Fiscal and Program Analyst

Legislative Research Council

RE: 2021 Legislative Session Salary

In accordance with SDCL 2-4-2, each year the State Board of Finance is asked to ascertain and adjust the salary for the members of the Legislature for the upcoming regular session.

By statute, the session salary for each member of the Legislature is equal to one-fifth of the South Dakota median household income as reported by the United States Census Current Population Survey. The 2019 median household income data was released in September. For South Dakota, the reported amount is \$64,255. In accordance with statute, the 2021 legislative salary is one-fifth of that amount, or \$12,851. However, because the state payroll system requires a daily rate to be used, the salary rate should be adjusted to \$12,850.50.

Therefore, it is requested that the State Board of Finance ascertain and adjust the 2021 legislative session salary to be set at a rate of \$12,850.50 to take effect on the first day of January 2021.